

## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/27/92

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->

NYD986999332

FACILITY NAME -> NEW ARCHIVE CLEANERS

MAILING ADDRESS -> 670 GREENWICH ST NEW YORK, NY 10014

INSTALLATION ADDRESS -> 670 GREENWICH ST

NEW YORK, NY 10014

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II 26 FEDERAL PLAZA NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TERRELONGE, VERNAL TO: NEW ARCHIVE CLEANERS 670 GREENWICH ST NEW YORK, NY 10014

5 5 13

United States Environmental Protection Agency Washington, DC 20460

## SEPA Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only	<b>这些的权利的</b> 对数据	
	comments	* SECTION SCHOOL ST. 12 * W.
c ;		
But it is Admin		Received 92 APR 15 PM I2: 3U
Installation's EPA ID Number	Approved (yr. n	no. day)
FN1410191869993312	1 920	4/15 Vew 400
I. Name of Installation		
NEW Archive C/	0/5	
II. Installation Mailing Address		
Stre	et or P.O. Box	
3670 Greenwich	57	37 S 1 M AL V (201 A)
City or Town		State ZIP Code
Mew York		1410014
III. Location of Installation		
Street	r Route Number	The second state of the se
SAME SAME		
City or Town		State ZIP Code
c Ann		
W Installation Contact		
IV. Installation Contact  Name and Title (last, first, and job title)		Phone Number (area code and number)
CT. E D P E / D M B E   1/	FRNAL	119891013
V. Ownership  A. Name of Installation's Legal Ov	ner	B. Type of Ownership (enter code)
ENEWARCHIWE CL	SANER	CORP-
VI. Type of Regulated Waste Activity (Mark 'X' in the	appropriate boxes. Refer to	instructions.)
A. Hazardous Waste Activity	B. Us	ed Oil Fuel Activities
☐ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.	6. Off-Specification Use	d Oil Fuel opropriate boxes below)
☐ 2. Transporter☐ 3. Treater/Storer/Disposer	a. Generator Ma	
4. Underground Injection		erd-acceptance
5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)	☐ c. Burner	
a. Generator Marketing to Burner	7. Specification Used Oi	il Fuel Marketer (or On site Burner)
∫ b. Other Marketer	Who First Claims the	Oil Meets the Specification
☐ c. Burner  VII. Waste Fuel Burning: Type of Combustion Device (	-tos'Y' in all appropriate have to	indicate two of combustion devicatelin
which hazardous waste fuel or off-specification used oil fuel is burne	I. See instructions for definitions	of combustion devices.)
	trial Boiler	C. Industrial Furnace
/III. Mode of Transportation (transporters only — ente	r 'X' in the appropriate box	((es)
A. Air B. Rail C. Highway D. Water E.	Other (specify)	. ( )
First or Subsequent Notification       Subsequent Notifica		
Mark 'X' in the appropriate box to indicate whether this is your ins satisfication. If this is not your first notification, enter your installation	allation's first notification of haz s EPA ID Number in the space pro	rardous waste activity or a subsequent ovided below.
		. Installation's EPA ID Number
A. First Notification  B. Subsequent Notification (complete	item CJ	

	Ī	c w	T/A (
X. Description of Hazardous Wastes (c	ontinued from front	1 12 14 10 14 15 15 15 16	
A. Hazardous Wastes from Nonspecific Sources from nonspecific sources your installation hand	Enter the four-digit nu	nber from 40 CFR Part 26	1.31 for each listed hazardous waste
1 1 1 2 2 1	33377	4 , []	<b>2</b>
F002		4	
7	9	10.	2 11
	3.7		
3. Hazardous Wastes from Specific Sources. En specific sources your installation handles. Use	er the four-digit numbe additional sheets if nece	from 40 CFR Part 261.32	Management of the state of the
13 14	15	16	17 - 18
19 20	(1.77°21%) 5.	22	23 24 24
25 26	70 × 27 4	28	29 30 30 30
750			아이되어리티 크리다
C. Commercial Chemical Product Hazardous Wa	stes. Enter the four-dig	t number from 40 CFR Pai	1 261.33 for each chemical substance
your installation handles which may be a frazar	dous waste. Use addition	nal sheets if necessary.	
31 32	33	34 ·	36 36
NEWA WE TO THE	1222	大さ 4	
37 38	. 39	40	41 - 42
43 44	45	46	Mr. 47 ch. 312 2 248 48 48
D. Listed Infectious Wastes. Enter the four-digit r	umber from 40 CFR Par	t 261.34 for each hazardo	us waste from hospitals, veterinary hos-
pitals, or medical and research laboratories you	r installation handles. U	se additional sheets if neo	essary.
49 50	51	52	53 54
11 中国整整 对本标品的	15 15 15 15 15	1 2 7 1 3 5 M	秦武 医医医院 医皮肤
Characteristics of Nonlisted Hazardous Waste your installation handles. (See 40 CFR Parts 26	1.21 - 261.24)	☐ 3. Reactive (D003)	acteristics of nonlisted hazardous wastes  4. Toxic (D000)
XI. Certification	A STATE OF THE PARTY OF THE PAR		
I certify under penalty of law that I ha this and all attached documents, and obtaining the information, I believe tha there are significant penalties for sub-	that based on my in at the submitted info	nquiry of those indivi ermation is true, accu	iduals immediately responsible for rate, and complete. I am aware that
Signature	VERNA	cial Title (type or print)	0NGE 4/9/92
EPA Form 8700-12 (Rev. 11-85) Reverse	P.A. Re	JOON I	

U.S. E.P.A. Region II Permits Admin Branch Rm 432 DG Federal Plaza. N.4, N.4 10278